## **Paging doctors**

Paging Doctors: Messages from a Medical Journalist. David Woods. 179 pp. Epigram Publishing, Ottawa, 1984. \$20. ISBN 0-9691765-0-3

Regardless of their chief interests among its various sections, most of the readers of the Canadian Medical Association Journal seldom fail to peruse the brief essay by David Woods, CMA's director of publications, that prefaces each issue. Here they are sure to find a clearly reasoned and plainly expressed exposition of an issue that is immediately relevant to the conduct of physicians' affairs or to cultural implications of professional attitudes. These articles, in other words, are directly related to the primary function of the essay, "to come home to Mens Businesse, and Bosomes". True, their style cannot be described as Baconian, but their matter is provocative and stimulating in the classic tradition of their literary form. The number of wide-ranging subjects that receive shrewd comment is impressive.

One can expect that there will be frequent occasions when readers will wish to refer again to the thoughts expressed, to recall the arguments adduced or to enjoy the grace of the writing itself. Therefore, it was a happy idea to publish a collection of these pieces as a book. Some of them will become outdated, but most deserve rereading and preservation in an easily accessible form. They constitute an attractive volume.

It is fitting that the opening article should deal with the proper use of language, for this is one of the author's main preoccupations. It is a recurrent theme throughout the book. Vogue words, clichés, solecisms, and turgid or unclear expressions are all anathema to the author. One must admire the zeal and energy he brings to chiding those who carelessly erode the precision of the English tongue. David Woods' own

style is at once urbane and of the utmost clarity, illuminated by flashes of humour and enlivened by the barbs he is not averse to casting at his audience. Its virtues are those advocated and practised by George Orwell, whose disciple the author proclaims himself. Nevertheless, features of his prose are the picturesque expressions and the occasional slips into journalese that he employs with good effect.

Included with the pieces written as introductions for CMAJ are transcripts of interviews with well known editors; these add variety to the text. There are also some longer articles that have been published in a number of other periodicals. Here, Woods casts his net beyond the medical field and displays his humorous touch. In describing himself as a medical journalist he is being too modest. Any assumption, on the basis of the book's title, that David Woods is mainly an apologist for the medical profession is dispelled by a careful reading.

This is no bedside book, for it is not designed to induce somnolence. But it should be kept close at hand for occasions when stimulating ideas are welcome.

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## **Emergency pediatrics**

Manual of Emergency Pediatrics. 3rd ed. Edited by Robert M. Reece. 788 pp. Illust. W.B. Saunders, Toronto, 1984. \$39.95. ISBN 0-7216-7499-2

Both my pediatric training and my experience as an emergency room pediatrician have shown me that there are three relatively common pediatric infections that need aggressive and immediate management. These include epiglottitis, meningitis, and periorbital and or-

bital cellulitis. The third condition is not mentioned in this manual. However, there is a beautiful 41-page, tabulated description of parasitic diseases. Also included are photographs of various ova and parasites that are not seen in the "Nelson Textbook of Pediatrics".

However, some conditions that are not well covered include vertigo, chronic cough, disorders of calcium metabolism, abdominal wall defects and so on. Instead of 8 pages on neck masses and 14 pages on sexually transmitted disease I would rather have seen an elaborate and nicely written chapter on lacerations. which are often encountered in any acute care facility. There also should have been more details on orthopedic trauma, which constitutes more than 15% of emergency visits and is usually handled by nonsubspecialty staff.

The manual is divided into three parts: true emergencies, presenting complaints and diagnostic entities. The last is a miscellaneous collection of conditions ranging from superficially discussed eye, ear, nose and throat disorders to complex endocrine and metabolic disorders. This format has led to a tremendous amount of repetition.

There are, however, well written chapters on head trauma, child abuse and neglect, coma and stupor, sepsis, and genitourinary and gynecologic disorders. The chapter on poisoning is appropriate and is updated with references. There are eight appendices on laboratory values, immunization, antibiotics and instructions to parents that also provide useful information on head injuries, fever, diarrhea and poisoning.

There are several aspects of the book that are irritating. For example, traditional, rather than SI, units are given for various laboratory values, so one has to use conversion factors and reference tables to change the values. The reference for rabies (page 389) is wrong. The photographs in the chapter on supraglottitis and croup are poorly reproduced. Isotherine (Bronkosol),

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instead of salbutamol (Ventolin), is recommended for the treatment of an acute attack of asthma; however, the former is not marketed in Canada. A word of caution is needed about the use of the commonly used antipyretic acetaminophen. The concentrations of acetaminophen in Tempra syrup and drops and in Tylenol drops given in this manual are not the same as those given in the "Compendium of Pharmaceuticals and Specialties", which means the table on page 429 is worthless.

Who will benefit from reading this book? Only the first 350 pages will be helpful to junior staff, residents and interns working in pediatric acute care facilities. However, the whole manual forms a useful and quick reference for house staff on wards and in ambulatory settings.

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## Mortality atlas

Mortality Atlas of Canada. Vol. 3. Urban Mortality. Cat. no. H49-6/3-1984. Department of National Health and Welfare and Statistics Canada, 1984. \$18.95 (\$22.75 in other countries). ISBN 0-660-52650-6

This volume deals with urban mortality in Canada. The facts, illustrated in dramatic graphics, include the following:

- Risk of heart disease is lowest in the Prairies.
- Deaths due to car accidents are much less frequent in cities than in less populated regions.
- Infant mortality is highest in northern and remote communities.
- Cirrhosis of the liver is a much greater killer in cities than in rural areas.
- Many areas in Quebec have particularly high rates of chronic obstructive lung disease.

The previous two volumes of the "Mortality Atlas of Canada", published in 1980, covered cancer and general mortality. The object of the atlas is to stimulate epidemiologic research, contribute to health education and planning, and improve data

collection systems — especially death certificate records, from which the atlas is compiled.

This volume differs from its predecessors in its use of graphics. The first two volumes displayed a map of Canada on each page spread and gave a very general picture of mortality trends. Each spread in volume 3 covers only one of five regions (the Atlantic provinces, Quebec, Ontario, the Prairies and British Columbia), so the cartographers were able to include far more information and to make a clear distinction between urban and rural areas. The price of displaying more detail is that fewer causes of death are included (i.e., volume 1 dealt with 16, volume 2 with 19 and volume 3 with only 8). However, the greater precision gives a clearer picture of regional and national trends.

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## Ophthalmologic features of systemic diseases

The Eye in General Medicine. Edited by F. Clifford Rose. 514 pp. Illust. University Park Press, Baltimore, Maryland, 1983. \$49.95 (US). ISBN 0-8391-1925-9

This book was originally intended as the second edition of "Medical Ophthalmology", which was published in 1976; however, the title was changed to emphasize that the book deals with the ocular manifestations of general medical diseases. The 24 authors, including 4 from the United States and Canada, have written within their areas of expertise. As with other multiauthor books there is a lack of uniformity in style and detail, some chapters being more readable and better illustrated than others.

The book is divided into six parts. The six chapters in part one include "Tests of visual function", "The eye in hysteria", "Computerized tomography in the investigation of visual loss", "Genetics", "Pigmentary retinopathies" and "Fluorescein angiography". Part two provides an extensive review of neurologic disorders,

starting with the ocular myopathies such as myasthenia gravis and the myotonic syndromes. Ocular palsies, nystagmus, eye movement disorders in basal ganglia diseases, and eye signs of head trauma are discussed in considerably more detail than one would expect in a general ophthalmologic text. Part three consists of an introduction to immunology, followed by a chapter on ocular infections that reviews such agents as Toxoplasma, herpesvirus and Treponema pallidum. A discussion on the etiology of, diagnostic tests for and treatment of uveitis is followed by a comprehensive review of sarcoidosis. The remaining three parts of the book deal with vascular diseases such as giant-cell arteritis, vasculitis and hypertension, endocrine diseases such as diabetes and Graves' disease, and skin disorders.

Questions such as What tests should be performed in a patient with uveitis?, What is the treatment for diabetic maculopathy or proliferative retinopathy?, What are the eye signs of giant-cell arteritis? and What is the value of temporal artery biopsy? are all well reviewed. However, I felt that the section on the ophthalmologic signs and treatment of many of the skin disorders, such as rosacea, atopic dermatitis and cicatricial pemphigoid, was incomplete and would have been improved with the use of illustrations.

It is difficult to know from its title whether the book was written primarily for general practitioners and internists who wish to update their knowledge on the ophthalmologic features of many of the common systemic diseases or for practising ophthalmologists as a review. Although Rose states that the general aspects discussed in part one will be of "great use" to those in medicine, I feel that the topics are discussed in too much detail for general practitioners, unless they have a good knowledge of ophthalmology. The sections on infections and vascular and endocrine diseases will be of value to all clinicians, whereas those on neuro-ophthalmologic disorders, which account for over 25% of the text, will best be appreciated by neurologists, neurosurgeons and ophthalmologists.

The amount of space allotted to the various topics does not always